2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000004697

FILED Apr 30, 2009 Secretary of State

Entity Nam	ne: SANCTA F	AMILIA ACADEMY, INC.		·		
Current Principal Place of Business:			New Principal Place of Business:			
	RBOR CITY BL NE, FL 32935	VD.				
Current Mailing Address:			New Mailing Address:			
	RBOR CITY BL NE, FL 32935	VD.				
FEI Number:	59-3727498	FEI Number Applied For ()	FEI Number Not Appl	licable () Certificate of Status Desired ()		
Name and	Address of Cu	rrent Registered Agent:	Name and	Address of New Registered Agent:		
ALF, LINDA 1904 ABING MELBOURI	NJ GTON DRIVE NE, FL 32901	US				
The above in the State		bmits this statement for the pur	pose of changing it	its registered office or registered agent, or both,		
SIGNATUR	E:					
	Electronic	Signature of Registered Agent	1	Date		
OFFICERS AND DIRECTORS:			ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	P () D NOONAN, DORO 763 TEAK DRIVE MELBOURNE, FL	THY M	Title: Name: Address: City-St-Zip:	P (X) Change () Addition FROGGE, KATHLEEN M 571 ULM RD. N.W. PALM BAY, FL 32907		
Title: Name: Address: City-St-Zip:	T () D ALF, LINDA J 1904 ABINGTON MELBOURNE, FL	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	S () D FROGGE, KATHL 571 ULM RD. N.W PALM BAY, FL 3	EEN M /.	Title: Name: Address: City-St-Zip:	S (X) Change () Addition ALF, LINDA J 1904 ABINGTON DRIVE MELBOURNE, FL 32901		
Title: Name: Address: City-St-Zip:	() D	elete	Title: Name: Address: City-St-Zip:	D () Change (X) Addition MURO, CHRISTOPHER 2030 REDWOOD CIRCLE N.E. PALM BAY, FL 32905		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LINDA J. ALF S 04/30/2009